| Family and Community Health Bureau Program Goals | Division: Public Health and Safety |
|--|------------------------------------|
| | Program: Family & Community Heal |

| | | Program: Family & Com | nunity Health |
|-----------------|--|-----------------------|---------------|
| Agency Name: | Department of Public Health and Human Services | | |
| Agency Contact: | Joanne Dotson | | 444-4743 |
| LFC Contact: | Senator Cobb, Senator Williams | | |
| LFD Liaison: | Kris Wilkinson | | 444-5834 |
| OBPP Liaison: | Pat Sullivan | | 444-1207 |

Program or Project Description:

Appropriation, Expenditure and Source

2008 Approp. **Expended** Fund Name: 517,008 516,407 General Fund 308,174 306,673 State Special Federal Funds 37,410 0 \$862,592 \$823,080 Total:

| Approp & Expenditure | 09 | 200 |
|----------------------|-----------|-------------|
| numbers are as of | Expended | Approp. |
| August 29, 2008 | 129,320 | 517,303 |
| | 10,019 | 490,000 |
| | | |
| | \$139,339 | \$1,007,303 |

Agency/Program #: 6901-07-G3

Completion Dates

Legislative Goal(s):

Provide programs and services to improve the health of Montana's women, children, and families

Legislative Performance Measures:

- 3. By January 1, 2008, have administrative rule in place to require expanded testing, and have in place a contract for NBS follow up
- 4. By June 30, 2009, assure that 95% of newborns receive timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their state-sponsored newborn screening program.
- 5. By December 31, 2007, increase the number of tribal sites providing Public Health Home Visiting services by conducting a RFP.
- 6. By June 30, 2009 examine the impact of home visiting on the incidence of low birth weight births in Montana.

| | 2009 Biennium Significant Milestones: | Target | Actual |
|---|--|----------|--------|
| | In response to a request for proposals, a contract for PHHV services was initiated with Northern | | |
| 1 | Cheyenne in Summer of 2008 | | |
| | Revised Administrative Rule to mandate newborn screening testing per legislative directive. | 1/1/2008 | Jan-08 |
| 2 | | | |
| | Conducted a request for proposal and contracted for newborn screening long term follow up | Jan-08 | Jan-08 |
| 3 | services. | | |
| | Education to providers and consumers regarding the changes in NBS requirements. | Jan-08 | Jan-08 |
| 4 | | | |
| | MCH epidemiologist are working with the data set and local communities to evaluate and improve | Jun-09 | |
| 5 | data sets and analyze outcomes. | | |

Agency Performance Report:

- 4. Montana moved from one of the states in the nation with the least mandated newborn testing to the top 1/3rd in the nation. Over 95% of newborns are receiving the mandated testing and follow up for metabolic and hearing screening abnormalities.
- 5. The public health home visiting program is part of the Montana Initiative for the Abatement of Mortality in Infants (MIAMI) act passed by the Montana legislature in 1989; codified legislation is included as Appendix H. Home visiting services are part of comprehensive efforts to improve the health of the maternal and child health population. Public Health Home Visiting uses a team consisting of a public health nurse, social worker, and dietician, to provide support and guidance to families who may not be able to access services.

In 2007 fifteen county and tribal sites provide home visiting services. In SFY 2006, 1186 pregnant women and their infants were served by the program. Performance measure tables are included in the data section.

LFD Narrative:

LFD ASSESSMENT: On Track DATA RELEVANCE: Yes

APPROPRIATION STATUS: Appropriation and expenditure data were provided.

COMMENTS/ISSUES: PHSD achieved its performance measurement related to having 95 percent of newborns receiving increased mandated testing within one year, one year ahead of their stated performance measurement goal. It appears the percentage of very low weight infants delivered at facilities for high risk deliveries and neonates has been trending upward since 2004. The percentage of women who smoke in the last three months of pregnancy, a factor contributing to low weight infants appears flat with little variation as does the percent of infants born to women who recieve prenatal care beginning in the first trimester. The work group may wish to discuss how the program antipicates the increased funding for home visiting will impact these measurements in the future. OPTIONS: Upgrade or downgrade the rating - options for workgroup in relation to the rating are No further review or Progress Report Requested



| Version | Date | Author |
|---------|-----------|--------|
| | 9/24/2008 | |
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| | Change Description |
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